

SBA PRE-QUALIFICATION LOAN APPLICATION

SBA OFFICE USE ONLY: DATE RECEIVED:

CID NUMBER:

Legal Name of Business:				Tax ID #:			
Address of Business:							
Business Phone #:				Date Business Established:			
Legal Structure: <u> </u> Proprietorship <u> </u> Partnership <u> </u> Corporation							
Standard Industrial Classification #:				Numbers of Existing Employees:			
Describe History of Business: (If NEW business, submit copy of Business Plan)							
Describe Business Operations:							
Is Business engaged in export trade? Yes <u> </u> No <u> </u> Do you intend to begin exporting as result of this loan? Yes <u> </u> No <u> </u>							
OWNERS/MANAGEMENT (proprietors, partners and shareholder) *							
Name	SS No.	% Owned	Sex	Military Service Y/N: From: To:			Race
TOTAL		100.0%					

* Personal financial statements must be submitted by all owners of 20% or more.

- a. Do any above individuals or groups of above individuals who hold ownership or management control of the applicant firm also have ownership or management control of any other business operations? Yes* No
 *If yes, please list each entity: _____

- b. Do any of the above individuals have personal unpledged liquid assets in excess of \$50,000 or 25% of the requested loan amount (whichever is greater)(excluding IRA's, CV Life Insurance, savings for education)? Yes* No
 *If yes, list each individual: _____

- c. Are any of the above individuals (a) presently under indictment, on parole or probation or (b) have they ever been charged with or arrested or convicted of any criminal offense other than a vehicle violation? Yes* No
 *If yes, the loan request must be submitted under the regular 7(a) loan program.
- d. Have any above individuals, the applicant firm or affiliates (a) been involved in bankruptcy or insolvency proceedings or (b) have pending personal or business judgements, unsettled lawsuits or major disputes? Yes* No
 *If yes, the loan request must be submitted under the 7(a) regular loan program.
- e. Do you or any member of your household, or anyone who owns, manages, or directs your business or members of their households work for the Small Business Administration, Small Business Advisory Council, SCORE or ACE, any Federal Agency, or the participating lender? Yes* No
 *If yes, the loan request must be submitted under the 7 (a) regular loan program.
- f. U.S. Citizen? Yes No*
 *If no, include a copy of Alien Registration Card (Form I 151 or 551). Alien Registration #: _____

PREVIOUS SBA OR OTHER GOVERNMENT FINANCING (Requested or obtained by principals, applicant firm or affiliates)					
Name of Agency	Declined or Approved	Date of Request	\$ Amount	Loan Balance	Current or Past Due
			\$	\$	
			\$	\$	
			\$	\$	

CREDIT HISTORY			
Credit Reports Obtained For:	Type of Report	Credit Rating	Comments:
Applicant			
Principal:			
Principal:			
Principal:			
Other:			

PROPOSED USES AND SOURCES OF FUNDS			
USES		SOURCES	
Working Capital	\$	SBA/Bank (requested loan amount)	\$
Inventory	\$	Equity/Injection ⁴	\$
Machinery & Equipment	\$		
Furniture & Fixtures	\$	Seller Financing	\$
Real Estate ¹ (purchase, construction, etc.)	\$	Other:	\$
Purchase an Existing Business ²	\$	Other:	\$
Debt Refinance ³ (incl. in listing, below)	\$	Other:	\$
TOTAL USES:	\$	TOTAL SOURCES:	\$
Proposed SBA/Bank Maturity		Proposed SBA/Bank Interest Rate	

- 1

If financing Real Estate, who or what entity will hold title:

If other than the applicant firm, list ownership of real estate:
- 2

Purchase price = \$

; Stock or asset purchase:

; Why is seller selling?:
- 3

If refinancing debts, state benefit to applicant firm:
4.

State the source of the injection:

BUSINESS INDEBTEDNESS: on all existing business debts, contracts, notes and mortgages payable. (Indicate by an (*) items to be paid w/ loan proceeds.)								
To Whom Payable	Original Amount	Original Date	Present Balance	Rate of Interest	Maturity Date	Monthly Payment	Secured by	Current or Past Due
	\$		\$			\$		
	\$		\$			\$		
	\$		\$			\$		
	\$		\$			\$		
	\$		\$			\$		
Total			\$	Total			\$	

Financial statements are: Internal Acc't. Compiled Reviewed Audited

BALANCE SHEET INFORMATION: (Dollars in Thousands)	Last FYE Date: _____	Interim Date: _____	Debit	Credit	Proforma
ASSETS:					
Cash	\$ _____	\$ _____			\$ _____
Accounts Rec.	\$ _____	\$ _____			\$ _____
Inventory	\$ _____	\$ _____			\$ _____
Other	\$ _____	\$ _____			\$ _____
TOTAL CURRENT ASSETS	\$ _____	\$ _____			\$ _____
FIXED ASSETS	\$ _____	\$ _____			\$ _____
OTHER ASSETS	\$ _____	\$ _____			\$ _____
TOTAL ASSETS	\$ _____	\$ _____			\$ _____
LIABILITIES & NET WORTH:					
Accounts Payable	\$ _____	\$ _____			\$ _____
Notes Payable	\$ _____	\$ _____			\$ _____
Taxes	\$ _____	\$ _____			\$ _____
Other	\$ _____	\$ _____			\$ _____
SBA	\$ _____	\$ _____			\$ _____
TOTAL CURRENT LIABILITIES:					
Notes Payable	\$ _____	\$ _____			\$ _____
SBA	\$ _____	\$ _____			\$ _____
Other					
TOTAL LIABILITIES	\$ _____	\$ _____			\$ _____
NET WORTH	\$ _____	\$ _____			\$ _____
TOTAL LIABILITIES AND NET WORTH	\$ _____	\$ _____			\$ _____

PROFORMA RATIO INFORMATION:	Applicant	RMA
Proforma Working Capital	\$ _____	XXXXXXXXXXXX
Proforma Current Ratio		
Proforma Quick Ratio		
Accounts Receivable Turnover (in days)		
Inventory Turnover (in days)		
Proforma Debt to Worth Ratio		

HISTORICAL & PROJECTED CASHFLOW FOR REPAYMENT INFORMATION							
	(Dollars in Thousands)	Prior Fiscal Year 19 _____	Prior Fiscal Year 19 _____	Most Recent Fiscal Year 19 _____	Interim mos. _____	RMA	Projection
a	Revenues	\$ 100%	\$ 100%	\$ 100%	\$ 100%	100%	\$ 100%
b	Gross Profit	\$ _____%	\$ _____%	\$ _____%	\$ _____%		\$ _____%
c	Interest Expense	\$ _____%	\$ _____%	\$ _____%	\$ _____%		\$ _____%
d	Owner Withdraw	\$ _____%	\$ _____%	\$ _____%	\$ _____%		\$ _____%
e	Net Income (Aftr w/d, dvds, txs)	\$ _____%	\$ _____%	\$ _____%	\$ _____%		\$ _____%
f	Depreciation	\$ _____%	\$ _____%	\$ _____%	\$ _____%		\$ _____%
g	Cash Flow (c+e+f)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
h	Rent Expense Saved (if applicable)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
i	Other Expense Saved (explain)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
j	Cashflow for Debt Service (g+h+i)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
k	Existing Debt Service (Prin. & Int.)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
l	New Debt Service (Prin. & Int.)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
m	Total Debt Service (k+l)	\$ _____	\$ _____	\$ _____	\$ _____	XXX	\$ _____
n	Debt Coverage Ratio (j÷m)					XXX	

Combined Household Income:\$ _____

Number in Household: _____

Other Sources of Income:\$ _____

Withdrawals:\$ _____

COLLATERAL SUMMARY	Cost	Market Value	Prior liens
Land and Buildings			
Machinery & Equipment			
Furniture and Fixtures			
Accounts Receivable			
Inventory			
Other:			
TOTAL			
Evaluation by:		Date:	
Total Cost or Appraised Value		XXXXXX	
Less: Prior Liens		XXXXXX	
= Net Collateral Value		XXXXXX	
COVERAGE RATIO: (net collateral value ÷ loan amount)		XXXXXX	

Is firm considered a frequently polluting industry? _____ Yes* _____ No
 *If yes, Phase I must be completed and submitted in the private sector lender's loan package.

OTHER PERTINENT INFORMATION:
MANAGEMENT EXPERIENCE/BACKGROUND (Describe key management/owner's education & business experience)

CERTIFICATIONS OF APPLICANT AND NON-PROFIT INTERMEDIARY

I hereby certify that all information contained in this document and attachments is true and correct to the best of my knowledge. If you knowingly make a false statement or overvalue a security to obtain a guaranteed loan from SBA you can be fined up to \$10,000 or imprisoned for not more than five years or both under 18 USC 1001.

IF A PROPRIETOR OR GENERAL PARTNER, SIGN HERE:

By: _____ Title: _____ Date: _____
 Address: _____

IF A CORPORATION, SIGN HERE:

Corporate Name: _____
 By: _____ Title: _____ Date: _____
 Attested by: _____
 Signature of Corporate Secretary

NON-PROFIT INTERMEDIARY: _____

By: _____ Title: _____ Date: _____